APPLICATION DATA SHEET

Application Information

National Phase 10/550192

Subject Matter::

Application Type::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)::

Number of copies of CRF::

Title::

SYNERGISTIC COMBINATION COMPRISING ROFLUMILAST AND AN ANTICHOLINERGIC AGENT SELECTED FROM IPRATROPIUM, OXITROPIUM AND TIOTROPIUM SALTS

FOR THE TREATMENT OF RESPIRATORY

DISEASES

Attorney Docket Number::

26965U

No

4

Request for Early Publication?::

Request for Non-Publication?:: No

Suggest Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed U.S. Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DΕ

Status:: Full Capacity

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Initial 9/21/2005

Given Name:: Daniela

Middle Name::

Family Name:: BUNDSCHUH

Name Suffix:::

City of Residence:: Konstanz

State or Province of Residence::

Country of Residence:: DE

Street of Mailing address:: Rheingutstrasse 17,

City of mailing address:: Konstanz

State/Province of mailing address::

Country of mailing address:: DE

Postal Code of mailing address:: 78462

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Stefan-Lutz

Middle Name::

Family Name:: WOLLIN

Name Suffix:::

City of Residence:: Meersburg

State or Province of Residence::

Country of Residence:: DE

Street of Mailing address:: Lehrenweg 15/4,

City of mailing address:: Meersburg

State/Province of mailing address::

Country of mailing address:: DE

Postal Code of mailing address:: 88709

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Christian

Middle Name::

Family Name:: WEIMAR

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Initial 9/21/2005

Name Suffix:::			
City of Residence::	Konstanz		
State or Province of Residence::			
Country of Residence::	DE		
Street of Mailing address::	Helene und Maria Schiess-Str.		
	29,		
City of mailing address::	Konstanz		
State/Province of mailing address::			
Country of mailing address::	DE		
Postal Code of mailing address::	78467		
Correspondence Information			
Correspondence Customer Number::	034375		
Name::	Gary M. Nath		
Street of mailing address::	1030 15 <sup>th</sup> St., N.W., 6 <sup>th</sup> Fl.,		
City of mailing address::	Washington		
State/Province of mailing address::	D.C.		
Country of mailing address::	U.S.A.		
Postal Code of mailing address::	20005-1503		
Phone number::	202-775-8383		
Fax number::	202-775-8396		
E-Mail address::	ip@nathlaw.com		

## Representative Information

Representative Customer	Number::	034375

## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
EP	03007104.7	28 March 2003 (28.03.2003)	Yes

## Assignee Information

Assignee name:: Altana Pharma AG

Street of mailing address:: Byk-Gulden-Str. 2

City of mailing address:: Konstanz

State/Province of mailing address::

Country of mailing address:: DE

Postal Code of mailing address:: 78467